



JAB & GAB



The Wyoming Immunization Program Newsletter

Pandemic Influenza Preparations

In order to be better prepared for a Pandemic Influenza event, during the 2008 seasonal influenza season, the 23 Public Health Nursing (PHN) offices that have been designated to receive Pandemic Influenza vaccines were required to hold at least one clinic between October 6 and November 2. The following PHN offices (note table) have held or have scheduled at least one clinic as part of the CDC's required Doses Administered Exercise (DAX) during the designated timeframe. Thanks to everyone for coordinating these events and ensuring that the immunizations are recorded into the Wyoming Immunization Registry (WylR) within 48 hours of completion of the event!

PHN Office	Date of DAX
Albany Co PHN-Laramie	*
Big Horn Co PHN-Greybull	10/14/2008
Campbell Co PHN-Gillette	10/28/2008
Carbon Co PHN-Rawlins	10/15/2008
Converse Co PHN-Douglas	*
Crook Co PHN-Sundance	10/23/2008
Fremont Co PHN-Lander	*
Goshen Co PHN-Torrington	*
Hot Springs Co PHN-Thermopolis	10/6/2008
Johnson Co PHN-Buffero	*
Laramie Co PHN-Cheyenne	10/11/2008
Lincoln Co PHN-Kemmerer	10/22/2008
Natrona Co PHN-Casper	10/25/2008
Niobrara Co PHN-Lusk	*
Park Co PHN-Cody	10/21/2008
Platte Co PHN-Wheatland	10/28/2008
Sheridan Co PHN-Sheridan	10/28/2008
Sublette Co PHN-Pinedale	10/15/2008
Sweetwater Co PHN-Rock Springs	10/25/2008
Sweetwater Co PHN-Green River	*
Teton Co PHN-Jackson	10/16/2008
Uinta Co PHN-Evanston	*
Washakie Co PHN-Worland	10/21/2008
Weston Co PHN-Newcastle	10/7/2008
*=unreported	



One of "Cheyenne's finest" getting a flu shot at the Cheyenne-Laramie County Health Department's 2008 "Drive Through" shot clinic, October 11, 2008. This clinic met CDC's requirement for the 2008 DAX.



Staff at Cheyenne-Laramie County Health Department received their "Sharp Shooter" award and gift card during the "Hot Wash" meeting on October 14 following their mass immunization clinic. Pictured are: Valerie Koch and Alisia Sanchez, who accepted the award.

Wyoming Department of Health

JAB & GAB

Volume 4, Issue 11
November, 2008

Sections

Vaccine Office 2

- WyVIP Refrigerator
- ActHib Shortages
- Registry Reporting & Updated Forms
- Holiday Closures
- Vaccine Overstock

Education Office 2- 3

- 30 Days of Flu Prevention Update
- New Staff Orientation
- Upcoming Events and Trainings

Clinical Services Office 4-5

- Novartis Pre-filled Syringes
- Chickenpox Vaccine
- Rotarix & Kinrix Vaccine
- July MMWR
- Update on Immunization Practice

WylR Office 5 - 6

- Recent site visit to STC Corporate Offices
- WylR and test database secure

- DAX and Mass Immunizations

- Old News

- WylR Room

Shining Stars 7

Calendar/Reminders 8

***Don't forget to check your email for communication from us!**

FYI! The JAB & GAB is posted on the www.immunizewyoming.com

website every month.



World of the Vaccine Office By Randy DeBerry

WyVIP Refrigerator Available-

Recently, Wagon Circle Clinic in Rawlins withdrew from the WIP program. WIP purchased refrigerator in their clinic is available to any clinic who thinks they could use it. If you are interested in this refrigerator please contact the Vaccine Program Manager, Randy DeBerry, at (307) 777-8983. Please note that your clinic will be responsible for transporting the refrigerator from Rawlins to your office, as well as all costs associated with the move.

ActHIB Shortage Update-

The nation is still dealing with shortages of HIB as a single antigen. ActHIB is the only HIB single antigen currently available. As Sanofi Pasteur has introduced Pentacel, more and more of the ActHIB supply is going into Pentacel, resulting is less available single antigen ActHIB. As a result of these shortages, the state supply of ActHIB vaccine is falling short of demand. For example, in October the state demand for single antigen ActHIB was approximately 1500 doses. Our allocation of ActHIB from the CDC was only 900 doses. The shortage is expected to continue and worsen for the foreseeable future. It should be noted that Sanofi Pasteur's long-term plans are to phase out ActHIB as a single antigen, and put all of their ActHIB supplies into Pentacel. Furthermore, according to new information released by Merck, Pedvax HIB production is not expected to resume until the middle of 2009. Therefore, if your clinic is not currently using Pentacel, you may want to consider it as an option in the future.

Vaccine Reports for Registry Users & Updated Forms-

Please note that if you are a registry user you DO NOT need to fax your monthly reports for current inventory and doses administered into the WyVIP Program UNLESS there is an error which you are noting for us. During their quarterly meeting on October 15th 2008, the Vaccine Advisory Board approved the addition of the Kinrix vaccine to the WyVIP formulary. As such, new doses administered and current inventory forms will soon be distributed to providers to reflect the addition of Kinrix.

Holiday Closures-

If you expect your office to be closed for any times outside of your usual working hours over the upcoming holiday season, please notify the WyVIP Program of the dates of these closures ASAP. This knowledge is important for the WyVIP Program so that we can take the necessary steps to avoid vaccine being delivered to your clinic during closures. Please note that if your office will be closed during the week you still need to have somebody checking your refrigerator temperatures, twice daily.

Vaccine Overstock-

A review of the current inventory for all WyVIP providers revealed that many clinics have excesses of vaccine that, based on doses administered reports, will not be used before the vaccine may expire. We ask that you please take an honest look at your inventory and vaccine usage, and let the program know of ANY excess vaccine that you have (i.e. vaccine you don't expect to use with an 8 to 10 week time period) so that we can transfer it to a clinic that can use it before it expires. Please be aware that our program may need to exercise the right to remove excess vaccine from your clinics if it is determined it will not be used before it expires.

30 Days of Flu Prevention Challenge Update: Andrea Clement-Johnson



As you know, the Centers for Disease Control and Prevention strongly recommends annual influenza vaccination for healthcare workers. In spite of this fact, each year, the rate for influenza vaccination among healthcare workers remains well below 40%, even though medical offices and healthcare professionals are exposed to the flu, repeatedly. This is unfortunate because of the impact of seasonal influenza on Wyoming's healthcare system and economy, as well. During the 30 days between **September 22 through October 31**, we invited all WyVIP Providers to meet a 100% influenza vaccination rate for their office staff. We are pleased to announce that several offices rose to this challenge! The following providers reported completing flu vaccination for their entire staff clinically eligible to receive flu vaccine:

Riverton Community Health Center
 Carbon County PHN, Saratoga
 Jackson Pediatrics
 Park County PHN, Powell
 Dr. David Ellbogen
 Big Horn County PHN, Lovell
 Platte County Public Health
 Lander Public Health
 Sheridan County Community Health
 Dr. Michael Granum
 Cheyenne Children's Clinic
 Sweetwater County Community Nursing
 Weston County Public Health

We hope all providers will consider completing this task well after October! **THANK YOU** for protecting yourselves and others this flu season!

New Staff Orientation: By Andrea Clement-Johnson

Many of you have noted or participated in the policy teleconferences we have been offering. This overview is intended to make new provider staff and/or new vaccine staff designees more comfortable with the policies and expectations of the WyVIP program.

In December, WIP will offer new staff orientation. This will include the policy training. Additionally, provider staff may participate in a comprehensive orientation to include a policy orientation, vaccine orientation, cold chain/storage and handling orientation, and registry orientation (if applicable). This training will be offered once per month and is intended for new staff handling WyVIP vaccine and new enrollees.

Beginning in 2009, this orientation will be an **ANNUAL REQUIREMENT** for re-enrollment into the WyVIP program. All provider staff who receive, administer, report or monitor WyVIP vaccines will be required to participate to meet enrollment requirements. More information will follow later, but orientations are currently planned for mid through late January. Please RSVP to Andrea at least one day prior to the trainings in 2008 in order to ensure that you have the appropriate call-in information and resources.

THANK YOU!

Upcoming Events & Trainings in Health and Immunization:

By Andrea Clement-Johnson



November 12: WIP Monthly Teleconference PLEASE NOTE DATE CHANGE: 12:15 p.m.-1:30pm.
Call in information 1-877-278-8686, Participant ID, 309491 .

November 13-14, 2008: 6th Annual Vaccines: All Things Considered Conference:
Location: Washington, DC

November 14-16, 2008: Clinical Vaccinology Course. Location: Bethesda, MD

Brochure: <http://www.nfid.org/pdf/conferences/idcourse08.pdf>

Register online: <https://secure.bnt.com/webresponse/nfid/idcourse08>

Continuous Effectively Addressing Parents' Concerns About Immunizations:

Web recast is available at <http://www.cdc.gov/vaccines/ed/ciinc/2008June.htm> Continuing Education credits available.

Continuous Adolescent Immunization: A focus on the next generation:

Featuring Joseph Domachowske, MD and Thad Wilson, APRN, PhD. Web recast available at <http://adolimmondemand08.haymarketmedical.com> or by phone teleconference at **1-888-696-0738**. Customer service support available at **1-866-330-7335**.

Clinical Corner-By Joanna Briggs, RN



McKesson is shipping Novartis prefilled syringes which contain a 25 G x5/8" staked needle (permanently affixed to the syringe). We wanted to make you aware that this needle length is the recommended length for children and adults less than 130 lbs, as noted in the ACIP General Recommendations. Thus, when possible, we encourage the use of this presentation in children and adults less than 130 lbs. However, the presentation is licensed for use in persons aged 4 years and older, regardless of weight, and can be used that way if there is no other vaccine available to order as a substitute. Close attention to administration technique is critical if this presentation is used for a person weighing more than 130 pounds to assure that the vaccine is injected into the muscle and not into subcutaneous tissue.

CHICKENPOX FADING AWAY AFTER VACCINE'S DEBUT was a title for a recent article out of Chicago. "Barely a decade after American children started getting vaccinations for chickenpox, the once-universal disease of childhood has virtually disappeared from many parts of the country, according to a recent report. Some parents still hesitate to get their children immunized for what they consider a low-risk illness, but many doctors say the vaccine has drastically cut back on children's sick days and reduced potentially fatal complications. In Illinois, which requires schoolchildren to be vaccinated before starting kindergarten, chickenpox cases have declined more than 95 percent since 1994, the year before the vaccine was introduced."

Deaths related to chickenpox have nearly vanished, with just 15 annual fatalities estimated nationwide, according to the paper in a recent edition of the journal, *Pediatrics*, which reviewed a decade of research.

Before the chickenpox vaccine, more than 10,000 people were hospitalized each year with complications. (AP)

Rotarix®

During the Vaccine Advisory Board meeting of 10/15/08, it was decided to delay introducing the Rotarix® vaccine at this time. More data and direction will be made available. Rotarix® will be discussed at the next Vaccine Advisory Board, January 7, 2009.

Kinrix®

This is a newly licensed DTaP and IPV combination vaccine for children between 4 - 6 years old. Those receiving Pentacel training have heard of some of the parameters for Kinrix which include:

Kinrix is approved for the **5th dose** in the DTaP series and **4th dose** in the IPV series.

DTaP vaccine in Kinrix is Infanrix. Pediarix also contains Infanrix. Pentacel (which contains Daptacel).

Kinrix is licensed to follow an Infanrix dose.

ACIP recommends that whenever feasible the same manufacturer's DTaP vaccine should be used for all doses of the series.

Vaccination should not be deferred if the specific DTaP brand previously administered is unavailable or unknown.

Off-label use is not recommended.

Use of Kinrix for any dose EXCEPT the 5th dose of DTaP and 4th dose of IPV should be considered a vaccine administration error.

If Kinrix is inadvertently administered as an earlier dose in the series the dose may be counted as valid and does not need to be repeated if the minimum age and minimum interval since the prior dose are met.

Federal price is \$32.25 per dose.

Those attending the Wyoming Immunization Program's teleconference call on October 15 heard the discussion about the intermixing of DTaP containing vaccines. The following information was forwarded to CDC for a decision. Please read on with this **Page Insert for Kinrix for indications and usage**:

A single dose of KINRIX is indicated for active immunization against diphtheria, tetanus, pertussis, and poliomyelitis as the fifth dose in the diphtheria, tetanus, and acellular pertussis (DTaP) vaccine series and the fourth dose in the inactivated poliovirus vaccine (IPV) series in children 4 through 6 years of age whose previous DTaP vaccine doses have been with INFANRIX and/or PEDIARIX for the first three doses and INFANRIX for the fourth dose. (1) **MMWR July 2, 2002**. Data are insufficient to evaluate the use of DAPTACEL™ as a fifth dose among children aged 4–6 years who have received DAPTACEL™ for the previous 4 doses. DAPTACEL™ may be used to complete the vaccination series in infants who have received 1 or more doses of whole cell pertussis, DTP. Because of the reduced frequency of adverse reactions and demonstrated efficacy, ACIP recommends DTaP for all 5 doses of the routine diphtheria, tetanus, and pertussis vaccination series and for the remaining doses in the series for children who have started the vaccination series with whole-cell DTP vaccine (7). ACIP considers the data to be insufficient in terms of safety and efficacy to express a preference among different acellular pertussis vaccine formulations. Whenever feasible, the same DTaP vaccine should be used throughout the entire vaccination series. Data are limited on the safety, immunogenicity, or efficacy of different DTaP vaccines when administered interchangeably in the primary or booster vaccination of a child. However, if the vaccine provider does not know or have available the type of DTaP vaccine the child to be vaccinated had received previously, any of the licensed DTaP vaccines may be used to complete the vaccination series (7).

Notes from the Update on Immunization Practice 9/2008:

DTaP/ IPV is administered as intramuscular injection into the deltoid region

DTaP/ IPV is indicated for use as the fifth dose of DTaP and fourth dose (booster doses) of IPV in children aged 4 to 6 years who received DTaP and/or DtaP/Hep B/IPV as the first three doses and DTaP as the fourth dose.

To be published in the Morbidity and Mortality Weekly Report (MMWR) [Notice to Readers:] FDA Licensure of Diphtheria and Tetanus Toxoids and Acellular Pertussis and Inactivated Poliovirus Vaccine (Kinrix) for use as a Booster Dose in Children Aged 4 to 6 years.

-CONTINUED, NEXT PAGE-

CDC response: *In the recently published MMWR notice on Kinrix, the authors use the standard caveat regarding mixing different brands of DTaP vaccine: "Data are limited on the safety and immunogenicity of interchanging DTaP vaccines from different manufacturers. ACIP recommends that, whenever feasible, the same manufacturer's DTaP vaccines should be used for each dose in the series; however, vaccination should not be deferred because the type of DTaP previously administered is unavailable or unknown. In other words, professionals don't recommend routinely using Kinrix for the booster dose when vaccines other than Infanrix or Pediarix have been used for the primary series, but it is allowable.: Skip Wolfe-Immunization Program, CDC*

That said - - If Pentacel or Daptacel is the basic series, then one gives single antigen Daptacel at 4 – 6 years. No, you can't use Kinrix if Daptacel or Daptacel-containing product is the 3rd dose.

***"Public Health Nursing providers should consult with the state PHN office for final clinical direction
"PLEASE SEE INSERTS FOR THE "NOTES FROM THE ROAD" ARTICLE.***



**Get WylR'd!
by John
Anderson**

Recent site visit to STC Corporate Offices

In early October, Jan Bloom, Section Chief for the Wyoming Immunization Program, Andy Corbin, Chief Information Officer for the Department of Health, and John Anderson, WylR Program Coordinator, underwent a site visit with our WylR software vendor, STC. The purpose of the visit was two-fold: to allow our Section Chief an opportunity to meet with our software vendor to discuss expectations with them in several areas, as well as allowing our CIO the opportunity to discuss certain aspects of software that are specific to improving documentation and quality.

One of the most immediate positive outcomes of the meeting was that our CIO was able to work with WY DOH IT personnel and STC's staff directly to overcome an obstacle to acquiring a security certificate for our test database (see details below). STC has pledged on working with us to meet the additional following needs:

- Document describing general system set (build document)
- Tomcat and SSL configurations required to run IWeb
- Install documentation (db and war)
- Documentation re: Oracle maintenance requirements
- Access to updated test scripts

Summary of other states general back up practices:

Overall, despite it being in triple digits (in Arizona), I think that it was a quite worthwhile meeting. Much thanks for our Section Chief and CIO for taking the time to meet with our software vendor.

WylR and test database now secure!

Previously, I have iterated the need for the WylR testing environment to move from a desktop to a server. I am glad to announce that we have finally produced that result, with many thanks due to our Department of Health IT staff. If you are interested in viewing the test database, please navigate to the following link:

https://iweb-test.health.wyo.gov/iweb_wy/main.jsp

Unfortunately, when we installed the new test database, it was essentially the "skeleton," in that the patient and user information is lacking. We created a test user name for all PHN offices to use for the DAX & Mass Immunization training (see below); if your office is interested in using the test database for user training, please contact the WylR staff, and we will help create a test user name and password, as well as appropriate permissions as desired. We only ask that since it is a test database, only enter bogus patient information. This test change will not only allow providers to train users, but will also allow testing of potential version upgrades by our users that the test scripts supplied from our vendors can not properly anticipate. We hope that all providers will find access to the test system will not only assist in increasing staff competency, but quality of product as well, in that the users may identify system bugs in the test environment prior to being placed upon production. Again, much thanks to the Department of Health IT staff involved in the process for making this finally happen!

DAX & Mass Immunizations

As part of our CDC requirements for pandemic flu preparedness, all of the statewide Public Health Nursing (PHN) offices have agreed to participate in the annual Doses Administered Exercise (DAX). The PHN offices are using both the web-based Mass Immunizations Module of the WylR, as well as the Mass Immunizations Stand Alone (MISA). Part of the requirements for participation in the DAX is that offices need to have their immunization information entered into the WylR within 48 hours of doors closing for the selected clinic. Every year, more requirements are added to the seasonal flu campaign in order to provide us an opportunity to test our preparedness for a potential pandemic flu event. This year, providers are screening flu vaccine recipients for specific conditions, and enter the appropriately defined "tier" into the WylR. Participation has not only reacquainted the PHN offices on the Mass Immunization Module, it has also allowed them to analyze any potential gaps in data entry per CDC requirements. It has been quite a learning experience for providers, as well as for the WylR Program. There have been a couple of issues to work around, most notably the ability of the MISA to properly export the Tier data to the CDC as required. Much thanks to the offices for the patience in working through the issues; I know that three different versions of a user guide for our internal staff have been quite a bit to stomach in only two weeks worth of time, so I can definitely relate to any frustrations users may be experiencing in the field. The good news is that the PHN offices are taking the proper steps to ensure that the citizens of WY can be provided accessible vaccinations in the event of a pandemic or catastrophic situation. We look forward to sharing the figures with you in December. Again, thanks for all of the PHN offices for working with the WIP staff to ensure preparedness in the event of a pandemic flu situation.

Old news:

Multidose Flu Vials – published in October news letter

As the flu campaign once again presents itself, users of the WylR often have to handle multi-dose vials of flu vaccine, and are unsure how to enter the lot number information properly into the WylR. (CONTINUED)

In January of 2007, we presented the issue to our software vendor in their Help Desk:

"An issue arose the other day regarding how to properly record flu vaccine in the Registry for multi-dose vials....[W]e want to encourage providers to use the Registry as an Inventory Management tool, we need to assist them in properly recording their inventory. Our PHN contact Jackie Cushing, RN, states that when the PHN offices purchase private stock vaccine for Fluzone, it can contain multiple doses that can be issued to children 6-35 months (.25 ml) and 36 & greater (.5 ml). If they record a dose currently in the Registry it assumes that it is for the full dose. Jackie's concern is that the inventory will

Their response follows:

"To handle administering partial doses of flu vaccine, multiple lot number records need to be created - one lot number for each dose size, i.e. .25, .5. Then, when the vaccine is administered, the user selects the lot number for the correct age range and it decrements the correct dose amount. At this point, the system does not allow you to specify the dose size at the point of administration."

So, to properly record it in the WyIR, three lot numbers need to be entered: the "real" lot number, specifying the total .5 ml doses potentially out of the vial, along with two other lot numbers, both entered with an extension: "-.5ml" and "-.25ml." For those lot numbers with extensions, enter the total number of potential doses out of the vial for that dose; with the .25ml lot number, simply double the number of doses that were entered for the .5ml. After the vial is emptied, reconcile those doses to the lot number without an extension, and inactivate the lot numbers with extensions. Please feel free to contact the staff with any additional questions you may have regarding this process.

Laptops for WyIR Users – *published in October newsletter*

Please let us know if you are interested in receiving laptops for WyIR use in your office. Most of the laptops have been upgraded to 1 G hard drive, and some have a 512 mb hard drive. All have a network card, as well as a wireless card included, offering flexibility in the utilization for your practice. Thus far, only five offices have let us know of their interest. We have approximately 8 more available, but IT is always looking at ways to upgrade more machines and make them available to the WyIR program. If you are in need, please let us know, and we will get them to you as soon as possible. Thanks in advance for your interest and participation.



WyIR Room by Lisa Wordeman

As mentioned in Joanna's Notes From the Road insert, my role with the Immunization Program has undergone a few changes. For the most part, this will not affect your needs regarding the Registry. I will still be answering any Registry questions you may have and will continue to conduct Registry training, as needed. The biggest difference is that you may see my smiling face a bit more as I am out in the field also doing site visits.

This month I had the opportunity to go out on the road with Joanna and learn the ins and outs of our annual provider visits. I learned many new things and even more exciting, I was able to meet so many of the people that I speak with often on the phone. Once again, I found myself in Fremont county and even ventured into Sublette county as well. It was fun visiting the towns of Pinedale and Big Piney, as I'd never been that far west in Wyoming. Next month, I'll venture even further into Lincoln and Teton counties, which I'm looking forward to.

As you know, I'm only a phone call away-- 1-800-590-9754.

Top Vaccines Administered by WyIR Users In September 2008

Vaccine Type	# of Doses	% of Total
Pneumococcal(PCV7)	1544	9
Hep A 2 dose - Ped/Adol	1414	8
Varicella	1387	8
DTaP	1344	8
MMR	1282	8
Hib--HbOC	1182	8
Tdap	1170	7
IPV	1026	6
DTaP/Hep B/IPV	984	6
Rotavirus	702	4



Shining Stars!

By Lily Valdez

WyVIP thanks the following providers for submitting their **September reports** correctly and by the **2nd business day of October**.

ABC Pediatrics
Albany Co PHN
Arapahoe Health Center
Banner Medical Clinic
Bennett, Michele L., MD, PC
Big Horn Basin Children's Clinic
Big Horn Clinic
Big Horn Co PHN-Greybull
Big Horn Co PHN-Lovell
Campbell Co Memorial Hospital
Campbell Co PHN
Carbon Co PHN-Rawlins
Carbon Co PHN-Saratoga
Casper Natrona Co Health Dept
Cedar Hills Family Clinic
Cheyenne Children's Clinic
Converse Co PHN
Crook Co PHN
Ellbogen, David A., MD
Emerg-A-Care
Engle, Deeanne, MD
Fremont Co PHN - Lander
Fremont Family Practice
FT Washakie Health Center
Goose Creek Pediatrics
Goshen Co PHN
Green, Richard D., MD
Hot Springs Co PHN
Ivinson Memorial Hospital, Nursery
Johnson Co PHN
Lander Medical Clinic
Lander Regional Hospital
Laramie Pediatrics

Lincoln Co PHN-Afton
Lincoln Co PHN-Kemmerer
Michael D. Adams, MD, PC
North Big Horn Hospital - Clinic
Northeast Wyoming Pediatrics
Park Co PHN-Powell
Platte Co PHN
Rock Springs Family Practice, Inc
Sheridan Co Comm. Health
Sheridan Memorial Hospital
South Lincoln Medical Center
South Sheridan Medical Center
Star Valley Medical Center
Sublette Co PHN
Sublette Co RHC – Big Piney
Sublette Co RHC - Pinedale
Sweetwater Co Comm. Nursing Svcs-Green River
Sweetwater Co Comm. Nursing Svcs-Rock Spgs
Sweetwater Medical Group
Teton Co PHN
Thomas, Jennifer, MD, PC
Uinta Co PHN-Evanston
Uinta Co PHN-Lyman
UW Family Practice
Wagon Circle Medical Clinic
Wang, Lucase, MD
Washakie Co PHN
Weston Co PHN
Willow Creek Family Medicine
Woodward, Drew, MD, PC

By submitting their monthly reports correctly and by the 2nd business day of the month for **three months**, the following providers have achieved the **Good Job! Award** (stress ball push pen). These providers are now on target for the Excellent! Award (happy highlighter).

Family First, PC
Independent Family Practice - Thayne
Vigneri, Robert A., MD

The following providers have submitted their monthly reports correctly and by the 2nd business day of the month, for **six months**, and have achieved the **Excellent! Award** (happy highlighter). These providers are now on target for the Awesome! Award (hand shape massager).

Cesko Family Medicine
Jackson Pediatrics
Mountain View Medical Center
Rawlins Family Medical
Uinta Family Practice

Correction: Platte Valley Medical Clinic submitted their monthly reports correct for six months during the month of August for July reports. I apologize for not including Platte Valley Medical Clinic in September's newsletter. This provider is now on target for the Awesome! Award (hand shape massager). Thank you for doing great job and ensuring your monthly reports are always on time.

These providers have submitted their monthly reports correctly and by the second business day of the month for 9 months and have achieved the Awesome! Award (hand shape massager). These providers are now on target for the Super Star! Award (3 Function Brass Pen).

Alpha Family Medicine
Babson & Associates of Primary Care
Big Horn Pediatrics
Billings Clinic - Cody
Bridger Valley Family Practice
Brown, Craig, MD
CHCCW
Cheyenne Family Medicine
Cheyenne Health & Wellness Center
Evanston Pediatrics
Family Care Clinic, LLC
Family Medical Care

Family Medical Center
Fisher, Carol A., MD
Fremont Co Pediatric Clinic
Granum, Michael J., MD
Laramie Children's Clinic
Memorial Hospital of Carbon Co.
Memorial Hospital of Sweetwater Co
Moorcroft Clinic
Myers, Harlen, MD
Pediatric and Adolescent Clinic, Inc
Pockat, Tom, MD
Quinn, Michael J., MD-FAAP

Red Rock Family Practice
Riverton Community Health Center
St. John's Medical Center
Star Valley Family Physicians
Sweetwater Pediatrics, PC
The Family Clinic, LLC
Tri-County Medical Center
UW Student Health
Western Family Care
Western Medical Associates, LLC
Wind River Pediatrics



November 2009



Sun	Mon	Tue	Wed	Thu	Fri	Sat
						1
2	3	4 Monthly Reports Due	5	6	7	8
9	10	11	12 WIP Monthly Teleconference	13	14	15
16	17	18	19	20	21	22
23 /30	24	25	26	27 Office closed for Thanksgiving	28	29

Important Dates in November

November 4: ALL monthly reports due:

- Doses Administered Forms
- Inventory Forms
- Temperature Logs
- Special Clinic Order forms, flu doses administered, transfer of vaccine forms and/or preference forms

November 12: WIP Monthly Teleconference PLEASE NOTE DATE CHANGE: 12:15 p.m.-1:30pm.

Call in information 1-877-278-8686, Participant ID, 309491.

November 27: Office Closed for Thanksgiving.

Some important reminders about WyVIP:

- The maximum administrative fee your office may charge for WyVIP vaccine is **\$14.31** per shot.
- Vaccine nearing expiration must be reported to our office **within 60 days of expiration**.
- An up-to-date **emergency plan** for relocating vaccine in the event of power failures must be available in your offices.
- A primary and **secondary** immunization staff contact are necessary for each office.
- All Vaccine Information Statements (VIS) must be given PRIOR to administration of any vaccine.
- Please read the WyVIP policy packet and other available policies and procedures posted at www.immunizewyoming.com
- Please remember to clear the high/low readings on your digital thermometers. You may call Joanna Briggs for assistance.

WIP RELEVANT CONTACTS

Wyoming Department of Health
Community & Public Health Division
6101 Yellowstone Rd., Ste. 420
Cheyenne, WY 82002
Main Line: (307) 777-7952 Fax: (307) 777-3615
www.immunizewyoming.com

WIP Administration		Vaccine Program					
<p>Jan Bloom, M.S. Section Chief 307-777-6001 jan.bloom@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Program comments/complaints <p>Karoleigh Cassel Administrative Specialist 307-777-7621 karoleigh.cassel@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">To be transferred to the appropriate WIP staff memberTo request, verify receipt or processing of the following:<ul style="list-style-type: none">School nurse registry enrollment packetFlu marketing materialsFlu clinic website registration formsWebsite questions		<p>Randy DeBerry, M.A. Vaccine Program Coordinator 307-777-8983 307-631-1480 cell randy.deberry@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">WyVIP vaccine program comments/complaintsStaff comments/complaintsQuestions from the public regarding WyVIP vaccine supply or availabilityFlu allocationsVaccine Order Inquiries <p>Lily Valdez Provider Relations Administrative Assistant 307-777-8503 lily.valdez@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Order Confirmation Faxed to ProvidersLiterature/material order requestsWyVIP Enrollment Packets requestsWyVIP Policy and Procedure Packets requestsWyVIP Provider Agreement requestsWyVIP Policies and Procedures, including:<ul style="list-style-type: none">Incentive ProgramWithdrawal from WyVIP ProgramReporting Requirements					
Clinical & Outreach Program							
<p>John Anderson, M.A. Wyoming Immunization Registry Manager 800-599-9754 307-777-5773 cell john.anderson@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">WylR general questionsWylR program comments/complaintsWylR staff comments/complaints <p>Lola Wolfe Advantage Visit & Registry Data Clerk 307-777-1919 lola.wolfe@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Data entry of Registry RecordsCoCASA Reporting SupportVaccine Transfers		<p>Joanna Briggs, RN Clinical/Quality Compliance Coordinator 23 N. Scott, Ste 14 Sheridan, WY 82801 307-673-8930 307-214-7905 cell 307-673-5368 fax joanna.briggs@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">WyVIP Approved Vaccine SchedulesACIP Recommended SchedulesStorage, Handling/Cold Chain QuestionsDosing by Vaccine Brand/TypeVaccine Adverse EventsAnnual Site Visits <p>Lisa Wordeman, B.S. Quality & Compliance Consultant 307-777-2413 307-256-0503 cell lisa.wordeman@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Annual Site VisitsWylR technical questionsWylR training questions					
<p><u>For all PHN clinical and cold chain questions & issues, please contact:</u></p> <table><tr><td>Tom Henry, RN PHN Program Specialist Worland, WY 82401 tom.henry@health.wyo.gov</td><td>510 S. 15th Street 307-347-3001 * Adult Imm. questions</td><td>Lisa Lucas, RN PHN Program Specialist 307-777-7383 lisa.lucas@health.wyo.gov</td><td>* Child Imm. questions</td></tr></table>				Tom Henry, RN PHN Program Specialist Worland, WY 82401 tom.henry@health.wyo.gov	510 S. 15th Street 307-347-3001 * Adult Imm. questions	Lisa Lucas, RN PHN Program Specialist 307-777-7383 lisa.lucas@health.wyo.gov	* Child Imm. questions
Tom Henry, RN PHN Program Specialist Worland, WY 82401 tom.henry@health.wyo.gov	510 S. 15th Street 307-347-3001 * Adult Imm. questions	Lisa Lucas, RN PHN Program Specialist 307-777-7383 lisa.lucas@health.wyo.gov	* Child Imm. questions				
Health Education & Partnerships Program							
<p>Andrea Clement-Johnson, M.S., Ed. Education & Partnerships Coordinator 307-777-8981 307-631-8089 cell andrea.clement-johnson@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Educational requests/questionsProgram comments/complaintsPolicy, enrollment and eligibility questionsCoalition informationTeleconference information		<p>Grace Neeley, B.S. Education Specialist 307-777-8982 307-256-0504 cell grace.neeley@health.wyo.gov Contact for the following:</p> <ul style="list-style-type: none">Teleconference informationNewsletter InformationEducational requests/questions					
Wyoming EqualityCare (Medicaid)		Vaccine Manufacturers					
<p>Sheree L. Nall Provider Services Manager 307-777-8756 sheree.nall@health.wyo.gov</p> <p>Angela DeBerry Provider Services Manager 307-777-7257 angela.deberry@health.wyo.gov</p> <p>Contact for the following:</p> <ul style="list-style-type: none">EqualityCare (Medicaid) billing questionsCPT Coding		<table><tr><td>GlaxoSmithKline 833-475-8222 www.gsk.com Lawless Barrientos 303-877-0929</td><td>Sanofi Pasteur 800-822-2463 vaccineshoppe.com Frank John 719-481-5983</td></tr><tr><td>Merck 800-637-2579 www.merck.com Kathy Parrish 303-973-1615</td><td>Wyeth/Lederle 800-572-8227 Andrew J. Gess (512) 663-2423 (888) 685-5961, ext. 78471</td></tr></table>		GlaxoSmithKline 833-475-8222 www.gsk.com Lawless Barrientos 303-877-0929	Sanofi Pasteur 800-822-2463 vaccineshoppe.com Frank John 719-481-5983	Merck 800-637-2579 www.merck.com Kathy Parrish 303-973-1615	Wyeth/Lederle 800-572-8227 Andrew J. Gess (512) 663-2423 (888) 685-5961, ext. 78471
GlaxoSmithKline 833-475-8222 www.gsk.com Lawless Barrientos 303-877-0929	Sanofi Pasteur 800-822-2463 vaccineshoppe.com Frank John 719-481-5983						
Merck 800-637-2579 www.merck.com Kathy Parrish 303-973-1615	Wyeth/Lederle 800-572-8227 Andrew J. Gess (512) 663-2423 (888) 685-5961, ext. 78471						

Influenza Immunization for Health Care Professionals



■ Influenza is a serious and highly contagious disease.

The influenza virus spreads easily from person to person and can lead to serious complications. Many are hospitalized and some even die from influenza every year.

■ Health care professionals can be a key cause of influenza outbreaks in health care settings.

Health care professionals encounter high-risk patients throughout the influenza season in medical practices, hospitals, rehabilitation facilities and other health care settings. If a health care professional has influenza, he/she can easily transmit the disease.

■ The best way to reduce influenza transmission in health care settings is through annual immunization.

The Centers for Disease Control and Prevention (CDC) clearly states that one of the best ways to reduce influenza transmission in health care settings is through increased influenza immunization of health care professionals.

■ Influenza vaccination has minimal side effects.

The influenza vaccine will NOT give you influenza. Mild soreness of the arm and/or minor cold-like symptoms immediately following vaccination are the most common side effects.

■ Influenza immunization for health care professionals benefits everyone.

When health care professionals are vaccinated against influenza it protects patients, families and coworkers.

**PROTECT YOURSELF AND THOSE AROUND YOU:
GET VACCINATED AGAINST INFLUENZA THIS YEAR AND EVERY YEAR**

Visit www.PreventChildhoodInfluenza.org for more information



Childhood Influenza
Immunization Coalition
The Power of One Strong Voice



National
Foundation for
Infectious
Diseases

The *Childhood Influenza Immunization Coalition* initiatives are made possible through an unrestricted educational grant to NFID from sanofi pasteur.

PedvaxHIB® and Comvax® -- Supply Update

FINAL: Oct. 15, 2008

APPROVED STATEMENT FOR USE:

Merck has been working diligently to restore market availability of our HIB-containing vaccines, PedvaxHIB® and Comvax®. We had a goal of returning these vaccines to market in the fourth quarter of 2008. However, we have recently identified the need for an additional manufacturing change that will require a regulatory filing. Based on this situation, we are revising our projected market return to mid-2009 in the U.S. We are working hard to restore these vaccines to full availability. We will provide updates as more information becomes available.

Notes from the Road

November, 2008 Joanna Briggs, RN Clinical /Quality & Compliance Coordinator

1. **Cold Chain issues** continue to concern the Wyoming Immunization Program. Each month, I review each and every log for compliance. I continue to see logs missing parts of the required documentation. I call, as time allows, but I also depend on your reading and responding to this newsletter to ensure you know what I am looking for regarding completeness, which includes:
 - **Initials of recorder.**
 - **Time temperatures were recorded.**
 - **The recorded temperatures are outside of the dark colored (out of range) squares.**
 - **The freezer temperature is recorded with an actual number to indicate that the numbers are varying but within range, or that they are staying constant. (Constant can be an early sign that something might be wrong with the freezer or the thermometer).**
 - **If the temperature falls out of range, please include the corrective action you have taken, and the times (if known) when the problem was corrected. Please indicate that I have been called.**
 - **If temperatures fall out of range I need to be notified immediately so appropriate action can be taken.**
2. Many of you know and/or have met **Lisa Wordeman** when working on Registry training. Lisa Wordeman recently accepted a new position of **Quality & Compliance Consultant**. With this reassignment, multiple responsibilities and oversights are included such as:

Conducting VFC/AFIX reviews in enrolled provider offices.

Registry training and respond to provider registry questions during statewide VFC/AFIX reviews.

Registry Help Desk calls – coverage of the phone calls for registry questions when not traveling, including new provider registry training as needed.

Please join me we in welcoming Lisa “to the road”. She looks forward to meeting each of you personally. Lisa and I are scheduled to visit Albany, Sublette, Fremont, Lincoln, Teton, Uinta, & Sweetwater counties before December 5, 2008.

3. My title has been changed and has been expanded to: **Clinical/Quality and Compliance Coordinator**. This title includes:

-VAERS Officer. As each of you file VAERS reports, please secure a tracking number and forward those reports to me. This helps with provider education and alerts the state program of vaccine incident trends.

-Cold Chain Compliance. Each month the temperatures are being reviewed and I will continue to contact you personally or address the frequently occurring trends with you all in the news letter.

-Vaccine Education. As clinical direction is needed with regard to vaccines, I will respond individually or with conference phone training. An example is the recent Pentacel Training.

-Site Visit Overview. This includes the supervision and direction of the Quality and Compliance Specialists. We anticipate a second person may join us in the coming months. We have not determined the areas in which we will be assigned for traveling. I do not know who will be visiting each of you at this point. Currently, we are closing out the year and preparing for next year's travels.

-CoCASA Assessment Tool Oversight. With part of the above assignment I'm also involved in writing the User's Manual for the upcoming 4th Edition of CoCASA. This document will be distributed to all state vaccine programs in early 2009.

-New Provider Set-up Visits. As providers are enrolled in WyVIP, we will be visiting each facility within a few months of their enrollment. Initially, training will be given remotely on cold chain, vaccine schedules, and appropriate clinical vaccine use. You may expect us to stop by when we are in your area, as well.

-Review Current Literature on Vaccine-Preventable Diseases. With the rollout of more and more vaccines and the current research occurring with our present vaccines, there are always changes that need to be shared with providers.

-Orientation of New Immunization Program Staff at Facilities.

-Vaccine Safety Coordinator for the state's **Pandemic Influenza Preparedness Group.**

Pentacel contains ActHIB, which can be used to cover young children even with our HIB shortages. Starting shortly, part of WyVIP's HIB allocations will be moved to the Pentacel product. Keep in mind, if Pentacel is used in place of Pediarix, more single antigen Hep B will be required in your clinic's stock. Below are outlined some possible options for this transition. Please also see the dosing information from Sanofi Pasteur (back of page). More information is to come from CDC and Sanofi Pasteur.

WE ARE NOT BOOSTERING FOR HIB AT THIS TIME, ONLY HIGH RISK CHILDREN.

		Pediarix <ul style="list-style-type: none">• Infanrix• IPV• Hep B	Pentacel <ul style="list-style-type: none">• Daptacel• IPV• ActHIB	Kinrix <ul style="list-style-type: none">• Infanrix• IPV			
0	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	4 – 6 yrs
Hep B	Pediarix PCV7 ActHIB	Pentacel PCV7	Pentacel PCV7 Hep B	PCV7 MMR VAR Hep A	Pentacel	Hep A	DTaP/IPV/MMR/VAR
Hep B	Pediarix PCV7 ActHIB	Pediarix PCV7 ActHIB	Pentacel PCV7 Hep B	PCV7 MMR VAR Hep A	Pentacel	Hep A	DTaP/IPV/MMR/VAR
Hep B	Pediarix PCV7 ActHIB	Pediarix PCV7 ActHIB	Pediarix PCV7 ActHIB	PCV7 MMR VAR Hep A	Pentacel	Hep A	DTaP/IPV/MMR/VAR
Hep B	Pentacel PCV7 Hep B	Pentacel PCV7	Pentacel PCV7 Hep B	PCV7 MMR VAR Hep A	Pentacel	Hep A	DTaP/IPV/MMR/VAR
Hep B	Pediarix ActHIB PCV7	Pediarix ActHIB PCV7	Pediarix ActHIB PCV7	Infanrix PCV7 MMR VAR Hep A	Hib when authorized	Hep A	Kinrix
None	Pediarix ActHIB PCV7	Pediarix ActHIB PCV7	Pediarix ActHIB PCV7	Infanrix PCV7 MMR VAR Hep A	Hib when authorized	Hep A	Kinrix
None	Pentacel PCV7 HBV	Pentacel PCV7	Pentacel PCV7 HBV	PCV7 MMR VAR Hep A	Pentacel	Hep A	DTaP/IPV/MMR/VAR

SURVEY UPDATE:

Hello WyVIP Providers,

Recently many providers completed a WIP survey. This survey was to be completed by September 5, ensuring that your offices would receive an educational tool for your staff. We recently mailed the education tool to the providers for whom we had received responses. However, six providers submitted responses by fax which did not contain identifying information about which clinic had completed them. We are requesting that if you completed the survey by September 5, but HAVE NOT yet received your educational CD ROM, to please contact Andrea at 307 777-8981 to provide her your address so that you may receive your CD ROM as soon as possible. Sorry for any inconvenience and thank you very much.

WIP Monthly Teleconference

October 15, 2008

Minutes

Participants:

Internal Participants: Jan Bloom, Karoleigh Cassel, Andrea Clement-Johnson, Randy DeBerry, John Anderson, Lily Valdez, Lola Wolfe, Lisa Wordeman, Lisa Lucas, Tom Henry, Robert Grenwelge, Joanna Briggs,

External Participants: Dr. Quinn, Dr. Fischer, Casper Natrona Co Health Dept, Platte Co PHN, Fremont Co PHN-Riverton, Washakie Co PHN, UW Family Practice, Sweetwater PHN, City Co Health Dept-Cheyenne, Campbell Co PHN, Uinta Co PHN, CCC, Converse Co PHN-Douglas, Laramie Childrens Clinic

Agenda Item	Discussion	Action Steps
Section Chief Update (Jan Bloom)	Thank PHN offices on the line for the participation in the Doses Administered exercise that is scheduled for another 3 weeks. Decision was made at VAB meeting to include the Kinrix vaccine in November's vaccine orders. Survey will be sent out to get interest from individuals to identify how much Kinrix to order. Rotarix will not be offered at this time, and will revisit the Rotarix issue at next VAB meeting in January 2009.	Surveys will be sent out to determine amount of Kinrix to order in next Jab & Gab.
Fiscal Update (Robert Grenwelge)	All finances look good. Purchasing vaccine on a straight line basis for beginning of this biennium. Able to meet demand for vaccine that are available except for ActHIB.	
Vaccine Update (Randy DeBerry)	WIP refrigerator available at Wagon Circle Clinic in Rawlins. You will be responsible for shipping and all costs involved. ActHIB shortage <ul style="list-style-type: none">Expected to continue for the foreseeable future.	

	<ul style="list-style-type: none">• 900 doses of ActHIB allocated for the month of Oct by CDC• 900 doses of Pentacel were allocated but 700 doses were unordered.• If not using Pentacel, might want to consider begin using it. If so, submit a Special Clinic Order form requesting amount of Pentacel needing.• No Update on when Pedvax will be back on the market.• Make sure to inform the Vaccine Program of holiday closures, to ensure you do not receive a shipment of vaccine.• Per Jan during holiday closures it is required that temperatures are monitored twice a day. Federal requirements say twice daily temperature logs. At this time we are not requiring to monitor during weekends, but during the week. <p>Per Robert:</p> <p>ActHIB as a single antigen will be going away. This was a plan made by Sanofi Pasteur that was timed to coincide with the introduction of Pentacel.</p> <p>Vaccine Overstock</p> <ul style="list-style-type: none">• Many clinics have large excesses of vaccine that, based on their doses administered reports, it appears they will not use before they expire.• Take and honest look at your inventory, and the vaccine usage, and inform via Excess Vaccine form of any excess vaccine (i.e. vaccine you don't expect to use with in an 8 to 10 week time period) you have so that we can transfer it to a clinic that can use it.• Please be aware that our program may need to remove excess vaccine and has the right to take excess vaccine from your clinic if determined it will not be used before it expires. <p>Per Jan:</p> <p>If there is a short shelf life, because of the HIB shortage. If your doses administered report indicates that you may not use it and there are other practices that may be short we may request that it be transferred out.</p>	
--	---	--

<p>Lily Valdez</p>	<p>Forms</p> <ul style="list-style-type: none"> • Registry users do not need to fax registry reports unless there is a correction to be made. If you wish to print and fax the registry reports, please select publicly supplied only in the Lot # summary before printing inventory report. • Use updated DA/Inv forms. • Updated Toolkit with new forms. • Old forms will be considered non compliant. • Use Flu DA/Inv forms to report Flu vaccine. <p>Vaccine Transfer Supplies</p> <ul style="list-style-type: none"> • If you have any transferring supplies for transferring please mail those back to the Immunization Program as soon as possible. • If you are not able to transfer the vaccine right away then call the Vaccine Program and we will call the provider to receive the vaccine if the vaccine is still needed. • As the receiver when mailing back the box and other transferring supplies only use regular postal mail. If you send the box back certified you will only be refunded what the postal service charges. 	
<p>Education Update (Andrea Clement-Johnson)</p>	<ul style="list-style-type: none"> • Some flu campaign items are still available for folks who would like to submit additional request and/or first requests. Please contact Andrea at 777-8981. • Please continue to send us your scheduled flu clinics throughout the season. • WIP comprehensive training for new staff is October 16, including orientation for policy, vaccine monthly ordering, cold chain/storage and handling, and registry (as applicable). The policy call begins at 8:00 am with each session immediately following. Please use the WIP teleconference number to access the call. This is recommended for 	

	<p>new staff or staff that has taken over vaccine duties. However, as mentioned in last Jab&Gab and last WIP teleconference beginning in January 2009 this will be a requirement for annual reenrollment.</p> <ul style="list-style-type: none"> • 30 days of flu prevention activity reminder/announcement-due by October 31-We are excited to have seen a few begin trickling in, please participate! <p>On form where it states location, it is meant for where the person received the shot not the site administration.</p>	
<p>Clinical Update (Joanna Briggs)</p>	<ul style="list-style-type: none"> • Advisory Board meeting this morning decided to hold introducing into the Rotarix into the schedule until which time the studies that are underway are released. Further ACIP recommendations are forthcoming. • Kinrix will be added to the immunization offering. Those attending the Pentacel conference calls have heard about this vaccine but for those who missed it, it is an Infanrix and IPV combination that is licensed for 4-6 year olds only and as the 5th DTaP vaccination. • Cold chain – please complete your temp logs. Still missing times, initials, freezer temps in numbers when they are below -17 degrees. It is mandatory that temp be monitored twice daily Monday to Friday. Check out your thermometer if the temp is staying a constant for the entire month. What is your min/max saying? Does it vary? Have you changed the batteries in the digital this fall? Don't leave without assigning temp logs to someone else when you are the primary contact. <p>This is the CDC interpretation.....still saying if your Pentacel or Daptacel is the basic series then you give single antigen Daptacel at 4-6 years. So the question of today is <u>No, you can't use Kinrix if you are a Daptacel clinic.</u></p>	

	<p>Will be out of the office more between now and the first of the year. If you aren't able to get a hold of her on the phone leave a message.</p>	
<p>Registry Update (John Anderson)</p>	<p>Jan Bloom, Andy Corbin (IT CIO) and I visited with software vendor in Arizona. Andy was able to address some issues with trying to get the test database set up in a secure environment. Prepublished some information to Public Health Nursing office letting them to log into the test. We have a security certificate now in place, there are a couple of issues. There will be a testing environment set up with security certificate set up by the time the letters roll out. Please log on and start providing opportunities for training for new staff as well as any forecasting questions.</p> <p>When you log into the Registry you'll see we've replaced STC logos with our own WylR logo.</p> <p>Previously we had to release our own user guide with every version. The doses administered exercise with CDC could not properly import them unless they had upgraded to the new version, and had another state do the test and it looked great.</p> <p>Access the help feature that is present under the navigation menu in the Registry for every version that is released, it'll let you know what to expect and any changes.</p> <p>Latest version upgrade for 4.4.2.1, under State Reports the school form is now modified that will differentiate doses administered as HIB prp-Onp for HIB types.</p> <p>Reconciliation feature under lot numbers will now have the ability to inactivate multiple lots by selecting the check box and clicking update.</p> <p>Current bugs: Invalid doses given out in the state, print out the school form it will not</p>	

	<p>display the invalid doses properly. Fix will be coming.</p> <p>Flu: 3500 doses given in registry for both child and adult.</p> <p>If interested in Registry component training, please email John.</p>	
Q&A	<p>Is there a problem with receiving Prevnar?</p> <p>Kinrix: If they did not have 4th dose of Infanrix, then you can't use the Kinrix. Is this correct?</p> <p>If we only carry Daptacel, and they have Daptacel as their 4th dose and they come in for their kindergarten shot. Can we use a Kinrix or not?</p> <p>Will there be Flu vaccine for the younger children?</p> <p>Is Flumist still available?</p> <p>If you have Flumist and you know you will not be using it early on, please let the Vaccine Program know since it has a short shelf life.</p>	<p>No, there is no problem receiving Prevnar at this time. If you are out on Prevnar please let us know.</p> <p>Yes it is. If this is all you have then you do not miss an opportunity and give what you have.</p> <p>Yes, if that is all you have and do not have Infanrix.</p> <p>Yes, there is excess available. If you would like more Flu vaccine fax a Flu Vaccine Order form.</p> <p>No</p> <p>Cheyenne Children's Clinic is interested in receiving any extra Flumist.</p>

	<p>If you are on the registry, do you have to put the flu doses administered and inventory?</p>	<p>To the fullest extent possible put every flu dose in the registry.</p> <p>For 18 years and younger with flu vaccine yes, please enter it. If you give it to adults later on or even private stock that is you don't have to but we highly encourage it. That is the information we use at the end of the flu season to project what is needed for next season.</p>
	<p>Comment on the DAX and if there is any progress with that?</p>	<p>PHN offices are required to submit one Flu clinic. At least two required clinic submission clinics over a four week consecutive period. First week were successful web based transmission from Hot Springs Co Thermopolis office. Also, MISA uploads from Weston Co, Newcastle, and Laramie Co PHN Cheyenne. Data is coming across, and looks good.</p>
<p>Next WIP Teleconference</p>	<p>November 12, 2008. Will be one week earlier due to WIP staff being out of office.</p>	

Respectfully Submitted,

Lily Valdez, Provider Relations Administrative Assistant